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Form # as it appears on the TD-1:

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DESCRIPTION OF PROVISIONS SPECIFIC TO GROUP LIFE							
REVIEW REQUIREMENTS	Citation	Summary	Location in Contract (page and section #) If Applicable				
	Filing	Submissions	7.66				
TD-1	20 CSR 400- 8.200(3)(B)	Letter of transmittal which briefly describes benefits, purpose, and intended market					
Cover Letter	(3)(C)	disclose if form is new or a replacement					
Separate Submissions	(3)(D)&(E)	Life filed separate from health & group from individual-See Reg.for specific language.					
Actuary Certification	(3)(F)	Life & annuity filing accompanied by actuarial demonstrations of compliance					
		olicy Forms					
Groups Defined	376.691 RSMo.	Eligible groups defined Must specify specific group type by stating applicable section and subsection in cover letter with initial filing.					
Actuary Certification	376.693 RSMo.	Discretionary Group filing requirements must provide actuarial demonstration required under 20 CSR 400-8.200(3)(F) demonstrating reasonableness					
Dependent Coverage	376.695 RSMo.	Dependent coverage					
Grace Period	376.697 (1) RSMo.	Grace Period -31 days					
Incontestability	(2)	Period begins the earlier of the policy date or the issue date					
Attached Application	(3)	statement that copy of application is attached to policy and all statements are representations not warranties					
Evidence of insurability	(4)	conditions stated when insurer requires evidence of individual insurability as a condition of coverage					
Misstatement of age or sex	(5)	Amount of coverage provided as prem. paid would have purchased at the published rate at issue of policy					
Beneficiary	(6)	payment to beneficiary conditions/procedures					
Issuance of certificate	(7)	provision that insurer will issue certificate to policyholder specifying terms of coverage					
Conversion	(8)	Right to an individual policy of insurance due to termination of employment or eligible class					
Conversion	(9)	provision that if group policy terminates, or class of insured persons terminate, and person is insured for at least 5-years they are eligible for individual policy of insurance					
Benefits during conversion	(10)	A provision for death benefits during					
<u> </u>							

		conversion period		
Disability	(11)	continuation during disability		
Attach the All Life & Annuity Filings Form				
		with this checklist		

This checklist is in no way an exhaustive or a complete statement of all requirements and provisions that might be applicable. The *Italic* descriptions are areas which MDI frequently requires Insurers to make revisions of their policies or contracts. With respect to ordinary Life & Annuities, the remaining provisions are similar in substance to industry standards and NAIC model regulations. <u>Please refer to the statues and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statues and Regulations always prevails over these checklists.</u>